

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | RH | | 5/15 |
| O.I.P.E. CLASSIFIER | | -/- | 5/1/01 |
| FORMALITY REVIEW | H.T | 913 | 07/11/01 |
| RESPONSE FORMALITY REVIEW | CL | 1109 | 10-20-01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here

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BEST AVAILABLE COPY

JC 4/913

7/11
 11-26-01